U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program



OMB No. 1660-0008 Expiration Date: November 30, 2018

ELEVATION CERTIFICATE Important: Follow the instructions on pages 1–9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official. (2) insurance agent/company, and (3) building owner

		TION A – PROPERTY		·			RANCE COMPANY USE
A1. Building Owne GARY DAUPHIN		W-1				Policy Nun	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.423 WAVELAND AVE				. Route and	Company I	NAIC Number:	
CityStateZIP CodeWAVELANDMississippi39576							
A3. Property Desc TAX PARCEL # (10		nd Block Numbers, Ta 2.000)	x Parce	l Number, Legal De	escription, etc.)		
A4. Building Use (e.g., Residen	tial, Non-Residential,	Addition	, Accessory, etc.)	RESIDENTIAL		
Λ5. Latitude/Longi	tude: Lat. <u>N</u>	30-16-43	Long. V	V 89-23-15	Horizontal Datur	n: NAD	1927 🗵 NAD 1983
A6. Attach at least	2 photograpi	ns of the building if the	Certific	cate is being used to	o obtain flood insur	ance.	
A7. Building Diagra	am Number	5					
A8. For a building	with a crawls	oace or enclosure(s):					
a) Square foo	tage of crawls	space or enclosure(s)		0 sq ft			
b) Number of p	permanent flo	ood openings in the cra	awlspac	e or enclosure(s) w	rithin 1.0 foot above	adjacent gr	rade 0
c) Total net ar	ea of flood op	enings in A8.b() s	sq in			
d) Engineered	flood openin	gs? ☐ Yes ☐ N	0				
A9. For a building v	vith an attach	ed garage:	•				
a) Square foot	age of attach	ed garage0		sq ft			
b) Number of p	permanent flo	ood openings in the att	ached g	garage within 1.0 fo	ot above adjacent g	yrade .	0
c) Total net are	ea of flood op	enings in A9.b	0	sq in			
d) Engineered	flood openin	gs? Yes N	lo	-			
	SE	CTION B - FLOOD II	NSURA	NCE RATE MAP	(FIRM) INFORMA	TION	
B1. NFIP Communi				B2. County Name	······································		B3. State
WAVELAND 28526	2			HANCOCK			Mississippi
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	E1	IRM Panel ffective/ evised Date	B8. Flood Zone(s)	(Zo	se Flood Elevation(s) ne AO, use Base od Depth)
28045C0344	D	10/16/2009	1	/2009	AE		19
		Base Flood Elevation (•		
B11. Indicate eleva	tion datum u	sed for BFE in Item B9	9: 🔲 N	GVD 1929 ⊠ NA	.VD 1988 ☐ Otl	ner/Source:	
B12. Is the building	located in a	Coastal Barrier Resou	irces Sy	rstem (CBRS) area	or Otherwise Prote	cted Area (DPA)? ☐ Yes ⊠ No
Designation D)ate:		CBRS	□ ОРА			

IMPORTANT: In these spaces, copy the corresponding information	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No 423 WAVELAND AVE	Policy Number:		
City State WAVELAND Mississippi	ZIP Code 39576		Company NAIC Number
SECTION C – BUILDING ELEVATIO	N INFORMATION (S	URVEY R	EQUIRED)
C1. Building elevations are based on: X Construction Drawir	ıgs* 🔲 Building Un	der Constru	uction* Finished Construction
*A new Elevation Certificate will be required when construction			
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–' Complete Items C2.a–h below according to the building diag Benchmark Utilized: USM NETWORK	/30, V (with BFE), AR cam specified in Item / ertical Datum: NAVD	7. In Puert	/AE, AR/A1–A30, AR/AH, AR/AO. o Rico only, enter meters.
Indicate elevation datum used for the elevations in items a) the	rough h) below.		
☐ NGVD 1929 🔀 NAVD 1988 ☐ Other/Source:_			
Datum used for building elevations must be the same as that	used for the BFE.		Check the measurement used.
a) Top of bottom floor (including basement, crawlspace, or e	nclosure floor)	22. 0	
b) Top of the next higher floor		<u>N/A</u>	X feet meters
c) Bottom of the lowest horizontal structural member (V Zone	es only)	N/A _.	X feet meters
d) Attached garage (top of slab)	000000	<u>N/A</u>	X feet meters
 e) Lowest elevation of machinery or equipment servicing the (Describe type of equipment and location in Comments) 	building	N/A _.	X feet meters
f) Lowest adjacent (finished) grade next to building (LAG)		<u>13</u> . <u>9</u>	X feet meters
g) Highest adjacent (finished) grade next to building (HAG)		<u>14</u> . <u>3</u>	X feet meters
 h) Lowest adjacent grade at lowest elevation of deck or stair structural support 	s, including	<u>N/A</u>	X feet meters
SECTION D – SURVEYOR, ENGINE	ER, OR ARCHITEC	T CERTIFI	CATION
This certification is to be signed and sealed by a land surveyor, en I certify that the information on this Certificate represents my best statement may be punishable by fine or imprisonment under 18 U.	efforts to interpret the	data availa	law to certify elevation information. ble. I understand that any false
Were latitude and longitude in Section A provided by a licensed la	nd surveyor? 🗵 Ye	s 🗆 No	Check here if attachments.
Certifier's Name License DUKE LEVY 01722	Number		OUKE LEV
Title SURVEYOR			THED PROPERTY ENGINEER OF
Company Name DUKE LEVY & ASSOCIATES	N.		SEA1448 S. 1722
Address 4412 LEISURE TIME DRIVE			Here SURVEYORS
City State DIAMONDHEAD Mississ	ZIP Co ppi 39525	de	MISS.
Signature Date 11/04/2	Teleph 018 (228) 4	one 67-5212	•
Copy all pages of this Elevation Certificate and all attachments for (1)	community official, (2)	insurance a	gent/company, and (3) building owner.
Comments (including type of equipment and location, per C2(e), if WO # 18-320 BENCHMARK - A NAIL SET IN A POWER POLE ON THE NORTH AN ELEVATION OF 16.00' FEET.	50 • 64 • 600 pt. 200 reference 2 pt. 2 • 600	'AY ENTRA	NCE TO 423 WAVELAND AVE AT

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program



OMB No. 1660-0008

Expiration Date: November 30, 2018

ELEVATION CERTIFICATE Important: Follow the instructions on pages 1–9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

	SECTION A - PROPERTY INFORMATION				FOR INSURANCE COMPANY US		
A1. Building Owner's Name GARY DAUPHIN					Policy Nu	mber:	
BOX NO.	A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.423 WAVELAND AVE				O. Route and	Company	NAIC Number:
City WAVELAND	State				ZIP Code 39576		
A3. Property Des TAX PARCEL#(and Block Numbers, Te (2.000)	ax Parc	cel Number, Legal D	Description, etc.)	· · · · · · · · · · · · · · · · · · ·	
A4. Building Use	(e.g., Reside	ntial, Non-Residential,	Additic	on, Accessory, etc.)	RESIDENTIAL		
A5. Latitude/Long	itude: Lat, <u>N</u>	l 30-16-43	Long.	W 89-23-15	Horizontal Datum	: NAD	1927 X NAD 1983
		hs of the building if the					<u> </u>
A7. Building Diag	ram Number	5					
A8. For a building	with a crawls	pace or enclosure(s):					
a) Square foo	tage of craw	space or enclosure(s)		0 sq ft			
b) Number of	permanent fl	ood openings in the cr	awispa	ce or enclosure(s) v	within 1.0 foot above	adjacent g	rade 0
c) Total net a	rea of flood o	penings in A8.b)	sq in			
d) Engineered	d flood openin	igs? 🗌 Yes 🥡 N	0				
A9. For a building	with an attacl	ned garage:					
a) Square foo	tage of attach	ned garage 0		sq ft			
b) Number of	permanent flo	ood openings in the att	ached	garage within 1.0 fc	of above adjacent or	ade	0
		enings in A9.b			or appropriation adjaconit gr		<u> </u>
		gs? Tyes TN		_ 34 ";			
ay Engineered	nood operm	83: [169 [N	U				
	SE	CTION B - FLOOD IN	ISURA	NCE RATE MAP	(FIRM) INFORMAT	ION	
B1. NFIP Communi WAVELAND 28526		ommunity Number		B2. County Name HANCOCK			B3. State Mississippi
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	E R	IRM Panel ffective/ evised Date	B8. Flood Zone(s)	(Zor	se Flood Elevation(s) ne AO, use Base nd Depth)
28045C0344	D	10/16/2009	10/16	/2009	AE		19
		ase Flood Elevation (E			pth entered in Item E	39:	
B11. Indicate eleva	tion datum us	ed for BFE in Item B9:	□ N	GVD 1929 🗵 NA	VD 1988	r/Source: _	
B12. Is the building	located in a	Coastal Barrier Resour	ces Sy	stem (CBRS) area	or Otherwise Protect	ed Area (O	PA)? Yes 🖾 No
Designation D			BRS	□ ОРА		,	
				·			

			Expiration Date: November 30, 2018
IMPORTANT: In these spaces, copy the correspondi	ng information from	Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and 423 WAVELAND AVE	Policy Number:		
	State	ZIP Code	Company NAIC Number
WAVELAND	Mississippi	39576	. , , , , , , , , , , , , , , , , , , ,
SECTION C – BUILDING E	LEVATION INFORI	MATION (SURVEY RE	EQUIRED)
	tion Drawings* construction of the but of t	Building Under Construuilding is complete. h BFE), AR, AR/A, AR/A ed in Item A7. In Puerto um: NAVD 1988 elow. he BFE.	AE, AR/A1–A30, AR/AH, AR/AO. o Rico only, enter meters. Check the measurement used. ightharpoonup feet ightharpoonup meters
d) Attached garage (top of slab)		N/A.	
e) Lowest elevation of machinery or equipment se (Describe type of equipment and location in Cor	rvicing the building mments)	 N/A	
f) Lowest adjacent (finished) grade next to building	g (LAG)	13.9	X feet meters
g) Highest adjacent (finished) grade next to buildin	g (HAG)	14.3	
 h) Lowest adjacent grade at lowest elevation of de structural support 		 N/A	⊠ feet
SECTION D - SURVEYOR	. ENGINEER. OR A	RCHITECT CERTIFIC	ATION
This certification is to be signed and sealed by a land su I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment ur Were latitude and longitude in Section A provided by a li-	rveyor, engineer, or a s my best efforts to int nder 18 U.S. Code, Se censed land surveyor	rchitect authorized by la terpret the data available action 1001.	oute and for all and the state of
Certifier's Name DUKE LEVY	License Number 01722		
Title SURVEYOR Company Name DUKE LEVY & ASSOCIATES	01722		SED PROFESSION OF AND O
Address 4412 LEISURE TIME DRIVE			Geale 7448 F Herts. 1722
City DIAMONDHEAD	State Mississippi	ZIP Code 39525	FOF MISSISS
Signature	Date 04/15/2019	Telephone (228) 467-5212	
Copy all pages of this Elevation Certificate and all attachmen		official, (2) insurance age	ent/company, and (3) building owner.
Comments (including type of equipment and location, per WO # 18-320-1 BENCHMARK - A NAIL SET IN A POWER POLE ON THE AN ELEVATION OF 16.00' FEET.		DRIVEWAY ENTRANG	CE TO 423 WAVELAND AVE AT

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A - PROPERTY INFORMATION					FOR INSU	RANCE COMPANY USE	
A1. Building Owner GARY DAUPHIN	A1. Building Owner's Name GARY DAUPHIN					Policy Num	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 423 WAVELAND AVE				Company N	IAIC Number:		
City WAVELAND			***************************************	State Mississippi	<u> </u>	ZIP Code 39576	
A3. Property Descr TAX PARCEL # (16		d Block Numbers, Tax .000)	Parce	Number, Legal De	scription, etc.)	***************************************	
A4. Building Use (e	.g., Resident	ial, Non-Residential, A	ddition	, Accessory, etc.)	RESIDENTIAL		
A5. Latitude/Longite	ide: Lat. <u>N</u>	30-16-43	Long, <u>V</u>	/ 89-23-15	Horizontal Datun	n: NAD 1	1927 × NAD 1983
A6. Attach at least	2 photograph	s of the building if the	Certific	ate is being used to	o obtain flood insur	ance.	
A7. Building Diagra	m Number _	5					
A8. For a building v	ith a crawlsp	ace or enclosure(s):					
a) Square foot	age of crawls	pace or enclosure(s)		0 sq.ft			
b) Number of p	ermanent flo	od openings in the cra	wlspac	e or enclosure(s) w	ithin 1.0 foot above	adjacent gr	ade0
c) Total net are	a of flood op	enings in A8.b0	s	q in			
d) Engineered	flood opening	gs? ☐ Yes ☐ No)				
A9. For a building w	ith an attach	ed garage:					
a) Square foota	age of attach	ed garage 0	***************************************	sq ft			
b) Number of p	ermanent flo	od openings in the atta	ached g	arage within 1.0 fo	ot above adjacent o	grade	0
c) Total net are	a of flood op	enings in A9,b	0	sq in			
d) Engineered	flood opening	gs? Yes N	0	·			
	SE	CTION B - FLOOD IN	ISURA	NCE RATE MAP	(FIRM) INFORMA	TION	
B1. NFIP Communit				B2. County Name	·		B3. State
WAVELAND 28526	2			HANCOCK			Mississippi
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	E1	IRM Panel ffective/	B8. Flood Zone(s	(Zo	se Flood Elevation(s) ne AO, use Base
28045C0344	D	10/16/2009	10/16	evised Date /2009	AE	FIO	od Depth) 19
<u> </u>		Base Flood Elevation (Community Determ			epth entered in Iterr	ı B9:	
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source:							
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Tyes X No							
Designation D			CBRS	□ ОРА		·	- предоставля на пре
-				Imassauf			

IMPORTANT: In these spaces, copy the corresponding information	from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or 423 WAVELAND AVE	Policy Number:	
City State WAVELAND Mississippi	ZIP Code 39576	Company NAIC Number
		TOWNSON .
SECTION C – BUILDING ELEVATION IN		·
 C1. Building elevations are based on: Construction Drawings* *A new Elevation Certificate will be required when construction of C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, Complete Items C2.a–h below according to the building diagram s Benchmark Utilized: USM NETWORK 	V (with BFE), AR, AR/A, AR	VAE. AR/A1–A30. AR/AH. AR/AO
Indicate elevation datum used for the elevations in items a) throug	h h) below.	
☐ NGVD 1929 🗵 NAVD 1988 ☐ Other/Source:		
Datum used for building elevations must be the same as that used	for the BFE.	Check the measurement used.
a) Top of bottom floor (including basement, crawlspace, or enclos	sure floor)26_6	X feet meters
b) Top of the next higher floor	N/A.	X feet meters
c) Bottom of the lowest horizontal structural member (V Zones on		X feet meters
d) Attached garage (top of slab)	N/A	X feet meters
 e) Lowest elevation of machinery or equipment servicing the build (Describe type of equipment and location in Comments) 	ling <u>26</u> , <u>6</u>	X feet meters
f) Lowest adjacent (finished) grade next to building (LAG)	15. 3	X feet meters
g) Highest adjacent (finished) grade next to building (HAG)	<u> </u>	X feet meters
 h) Lowest adjacent grade at lowest elevation of deck or stairs, inc structural support 	luding15. 1	X feet meters
SECTION D - SURVEYOR, ENGINEER,	OR ARCHITECT CERTIF	ICATION
This certification is to be signed and sealed by a land surveyor, engined a certify that the information on this Certificate represents my best effort statement may be punishable by fine or imprisonment under 18 U.S. C	ts to interpret the data availa	y law to certify elevation information. able. I understand that any false
Were latitude and longitude in Section A provided by a licensed land su	ırveyor? 🗵 Yes 🗌 No	☐ Check here if attachments.
Certifier's Name License Nur DUKE LEVY 01722	nber	
Title SURVEYOR		JKE LEVY
Company Name DUKE LEVY & ASSOCIATES		Place NEER SOLE PROPERTY OF THE PROPERTY OF TH
Address 4412 LEISURE TIME DRIVE		10 1722 5 d
City State DIAMONDHEAD Mississippi	ZIP Code 39525	ALE ALE VICE
Signature Date 10/17/2019	Telephone (228) 343-9691	
Copy all pages of this Elevation Certificate and all attachments for (1) com	munity official, (2) insurance	agent/company, and (3) building owner.
Comments (including type of equipment and location, per C2(e), if appli WO # 19-18-320 BENCHMARK - A NAIL SET IN A POWER POLE ON THE NORTH SID AN ELEVATION OF 16.00' FEET. THE LOWEST MACHINERY SERVICING THE HOME IS AN A/C UNIT	DE OF A DRIVEWAY ENTR	

IMPORTANT: In these spaces, copy the corresp	onding information	from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, 423 WAVELAND AVE	and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
City WAVELAND	State Mississippi	ZIP Code 39576	Company NAIC Number
SECTION E – BUILDING FOR Z		RMATION (SURVEY NO E A (WITHOUT BFE)	T REQUIRED)
For Zones AO and A (without BFE), complete Items complete Sections A, B,and C. For Items E1–E4, u enter meters.	s E1–E5. If the Certifi se natural grade, if a	icate is intended to support vailable. Check the measur	a LOMA or LOMR-F request, ement used. In Puerto Rico only,
E1. Provide elevation information for the following the highest adjacent grade (HAG) and the low	and check the appropest adjacent grade (L	priate boxes to show wheth .AG).	er the elevation is above or below
a) Top of bottom floor (including basement, crawlspace, or enclosure) is		feet met	ers above or below the HAG.
b) Top of bottom floor (including basement, crawlspace, or enclosure) is			ers above or below the LAG.
E2. For Building Diagrams 6–9 with permanent floothe the next higher floor (elevation C2.b in the diagrams) of the building is	od openings provided	I in Section A Items 8 and/o	
E3. Attached garage (top of slab) is		feet	ers above or below the HAG.
E4. Top of platform of machinery and/or equipmen servicing the building is	.t		ers above or below the HAG.
E5. Zone AO only: If no flood depth number is ava floodplain management ordinance? Yes	ilable, is the top of the	e bottom floor elevated in a lwn. The local official mus	ccordance with the community's t certify this information in Section G.
SECTION F - PROPERTY (OWNER (OR OWNE	R'S REPRESENTATIVE) (ERTIFICATION
The property owner or owner's authorized represent community-issued BFE) or Zone AO must sign here	Itative who completes	s Sections A, B, and E for Z Sections A, B, and E are co	one A (without a FEMA-issued or or or or to the best of my knowledge.
Property Owner or Owner's Authorized Representa	tive's Name		
Address	C	City	State ZIP Code
Signature	C	Date T	elephone
Comments			
			Check here if attachments.

IMPORTANT: In these spaces, copy the cor			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, § 423 WAVELAND AVE	Suite, and/or Bldg. No.) or P.O. Ro	ute and Box No.	Policy Number:
City WAVELAND	State ZIP Mississippi 39	Code 576	Company NAIC Number
SECTI	ON G - COMMUNITY INFORMAT	ION (OPTIONAL)	
The local official who is authorized by law or of Sections A, B, C (or E), and G of this Elevatio used in Items G8–G10. In Puerto Rico only, e	n Certificate. Complete the applica	nity's floodplain mar ble item(s) and sign	nagement ordinance can complete below. Check the measurement
G1. The information in Section C was ta engineer, or architect who is authoridata in the Comments area below.)	ken from other documentation that zed by law to certify elevation infor	has been signed ar mation. (Indicate the	nd sealed by a licensed surveyor, e source and date of the elevation
G2. A community official completed Sec or Zone AO.	tion E for a building located in Zon	e A (without a FEMA	A-issued or community-issued BFE)
G3. The following information (Items G4	–G10) is provided for community fl	oodplain manageme	ent purposes.
G4. Permit Number	G5. Date Permit Issued		late Certificate of ompliance/Occupancy Issued
G7. This permit has been issued for:	☐ New Construction ☐ Substanti	al Improvement	
G8. Elevation of as-built lowest floor (including of the building:	g basement)	feet	meters Datum
G9. BFE or (in Zone AO) depth of flooding at	the building site:	feet	meters Datum
G10. Community's design flood elevation:		feet	meters Datum
Local Official's Name	Title		
Community Name	Telephon	e	***************************************
Signature	Date		
Comments (including type of equipment and lo	cation, per C2(e), if applicable)		
			Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy to	FOR INSURANCE COMPANY USI		
Building Street Address (including Apt. 423 WAVELAND AVE	, Unit, Suite, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
City	State	ZIP Code	Company NAIC Number
WAVELAND	Mississippi	39576	10ML1 12"

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One

Photo One Caption



Photo Two

FEMA Form 086-0-33 (7/15)

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy to	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., 423 WAVELAND AVE	Unit, Suite, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
City WAVELAND	State Mississippi	ZIP Code 39576	Company NAIC Number

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Photo One

Photo One Caption



Photo Two

FEMA Form 086-0-33 (7/15)

NON-CONVERSION AGREEME Nathous A Kellar with CITY OF WAVELAND, MISSISSIPPI Author Conversion address at 313 (Examples Dr. MAMERIUE, WHEREAS, the Owner is the record owner of all that real property located at 423 Warden Dr.

WHEREAS, the Owner agrees to record this DECLARATION and certifies and declares that the following covenants, conditions and restrictions are placed on the affected property as a condition of granting the Permit, and affects rights and obligations of the Owner and shall be binding on the Owner, his heirs, personal representatives, successors, future owners, and assigns.

UPON THE TERMS AND SUBJECT TO THE CONDITIONS, as follows:

- 1. The structure or part thereof to which these conditions apply is:
- 2. At this site, the Base Flood Elevation is _____ feet above mean sea level, National Geodetic Vertical Datum.
- 3. Enclosed areas below the Base Flood Elevation shall be used solely for parking of vehicles, limited storage, or access to the building. All interior walls, ceilings and floors below the Base Flood Elevation shall be unfinished or constructed of flood resistant materials. Mechanical, electrical or plumbing devices shall not be installed below the Base Flood Elevation.
- 4. The walls of the enclosed areas below the Base Flood Elevation shall be equipped and remain equipped with openings as shown on the Permit.
- The jurisdiction issuing the Permit and enforcing the Ordinance may take any appropriate legal action to correct any
 violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for
 flood insurance.
- 6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration. Such inspections will be conducted upon due notice to the Owner and no more frequently than once each year. More frequent inspections may be conducted if an annual inspection discovers a violation of the Permit.
- 7. Other conditions:

In witness whereof the undersigned set their hands and seal	s this multiple day of _	oct	
Gary C Dauphin (Print)	* * * * * * * * * * * * * * * * * * * *	Timothy / Chancer	A. Kellar y Clerk (Print)
OWNER (Signature)	CK COUNTIN	WITNESS	Or DC (Signature)

My Commission Expires Dec. 31, 2019